NAME

Address City

Country

Power of Attorney

Copies of IDS

Citations

Zip Code

Fax

State

Telephone

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1 16(c))	42-20 =	22	X \$ 18.00 =	\$396.00
·	INDEPENDENT CLAIMS (37 CFR 1.16(b))	24-3 =	21	X \$ 80.00 =	\$1680.00
	MULTIPLE DEPENDENT	CLAIMS (if applicable) (37 CFR 1.16(d))		\$270.00 =	\$0
				BASIC FE (37 CFR 1.16	
			Total of	above Calculations	= \$2786.00
	Reduction by	50% for filing by small er	tity (Note 37 CFR 1.9, 1	.27, 1.28).	
				TOTAL	. = \$2786.00
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED					
NAME	LEONARD P. DIANA				
SIGNATURE	21 P. Dana 9,296				
DATE	February 8, 2001				